

Introduction

Functional Neurological Disorder (FND) is an umbrella term for a variety of syndromes and the second most common referral to neurology clinics.^{1,2} Despite increasing research and public attention, clinician understanding and acceptance of FND is often negative.^{3,4,5,6} Clinician bias can directly impact provider/client relationships and patient outcomes.⁴ It is vital that healthcare professionals directly address these harmful beliefs to improve the care for individuals with FND.⁷

We hypothesized that addressing health professionals’ knowledge gaps through a two-part webinar series would improve clinician acceptance and confidence in providing care for individuals with FND.

Materials & Methods

Participants

184 participants completed Webinar 1, “FND: An Introduction to Interdisciplinary Patient Care.”
111 participants completed Webinar 2, “FND: An Interdisciplinary Rehabilitation Approach for Allied Health Clinicians.”

Figure 1 - Participants

	Webinar 1	Webinar 2
Completed course	N= 184	N = 111
Responded to pre-and post-survey	N = 85	N = 98
% response	46.20%	88.29%
Occupational Therapist, Occupational Therapist Assistant	21	34
Physical Therapist, Physical Therapist Assistant	38	40
Physician	1	0
Prosthetist/Orthotist	0	1
Psychologist	5	0
Registered Nurse	3	0
Social Worker	6	6
Speech-Language Pathologist	11	17
5 or fewer years experience	30 (35.29%)	33 (33.67%)
6-10 years experience	19 (22.35%)	39 (39.80%)
Greater than 10 years experience	36 (42.35%)	25 (25.51%)

Procedure

Study was conducted at one hospital system March 2023-March 2024; approved by Northwestern University’s IRB, STU#00218927.

A team of rehabilitation clinicians with experience in FND developed two, 90-minute webinars; presented once live and subsequently on-demand. Pre- and post- surveys, developed using REDCap software (v13.8.1), included demographic data and 5 items (Q1-Q5) focusing on attitudes and comfort of clinicians. All items were rated on level of agreement (strongly agree to strongly disagree).

Figure 2 – Survey Questions

Clinician Attitudes:
Q1. FND is a legitimate, evidence-based medical diagnosis
Q2. Individuals with FND are often malingering and/or exaggerating their symptoms.
Clinician Comfort:
Q3. I am comfortable talking to an individual about their FND diagnosis.
Q4. I am comfortable providing skilled intervention in my discipline for an individual with FND.
Q5. I understand my clinical role on an interdisciplinary team treating individuals with FND.

Results

All five survey items showed a statistically significant shift toward more positive clinician attitudes (Q1, Q2) and higher clinician comfort (Q3, Q4, Q5) following each webinar (p-value < 0.05).

Two items revealed a change large enough to result in a median outcome difference, both in webinar 1: “FND is a legitimate, evidence-based medical diagnosis,” (Q1) median increased from “agree” to “strongly agree” and “I am comfortable talking to an individual about their FND diagnosis,” (Q3) median increased from “neutral” to “agree.”

Figure 3 – Results of Wilcoxon Signed Rank Tests

	Median Pre	Median Post	Change in mean statistically significant
Q1. FND is a legitimate, evidence-based medical diagnosis.	Agree	Strongly Agree	YES
	Strongly Agree	Strongly Agree	YES
Q2. Individuals with FND are often malingering and/or exaggerating their symptoms.	Disagree	Disagree	YES
	Disagree	Disagree	YES
Q3. I am comfortable talking to an individual about their FND diagnosis.	Neutral	Agree	YES
	Agree	Agree	YES
Q4. I am comfortable providing skilled intervention in my discipline for an individual with FND.	Agree	Agree	YES
	Agree	Agree	YES
Q5. I understand my clinical role on an interdisciplinary team treating individuals with FND.	Agree	Agree	YES
	Agree	Agree	YES
* mean change pre- to post-course , p-value > 0.05			Webinar 1
			Webinar 2

Conclusion

Webinars as short as 90 minutes may positively impact rehabilitation clinicians’ attitudes and comfort working with individuals with FND. Webinars are a resource-conscious method of reaching many providers with educational content.

Clinical Relevance:

Fostering more confident clinicians and an improved acceptance of FND will improve the quality of rehabilitation care for these individuals.^{8,9, 10, 11}

Limitations

Primary respondents of the survey were physical therapists, occupational therapists, and speech-language pathologists. A broader cross-section of health providers may alter results; it is possible that different disciplines may respond to education differently. This study focused on immediate self-report change in attitude/belief, which can lead to both recency bias and self-report bias. This study was conducted without long-term follow-up. Future research should look at sustainability of clinician attitude as well as assess any practice change that results.

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